

APPENDIX A: STORYBOARD TEMPLATE

LOCAL HEALTH DEPARTMENT NAME: Wright County Health Department

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POPULATION SERVED: Community/County Partners in Wright County and surrounding areas

PROJECT TITLE: QA/QI for Wright County Health Department Community Health Profile



PLAN

Identify an opportunity and Plan for Improvement

1. Getting Started

After brainstorming with community partners, it was evident that each of us had previously had difficulty getting current information for grants and for the Community Needs Assessment/Health Improvement Plan. Because of these issues, our agency decided to be involved in the planning group for data warehousing originally and then the Mini-Collaborative group.

On April 3, 2009, the Community Health Profile Mini-Collaborative kicked off with a meeting in Des Moines. This group was comprised of 8 agency reps from throughout the state and IDPH representation. Our goal was to help develop a standard Community Health Profile for all counties in the state.

2. Assemble the Team

Our agency QA/QI team has been active for a couple years so we had these staff members be the core of our team. Our first meeting after the Mini-Collaborative start up was in mid April. We discussed our goals and objectives for the Community Health Profile and how it related to our QA/QI process. Our agency administrator (who was part of our team) also shared our plan with the Community Pillar which is comprised of community members and key members from both hospitals in our county.

3. Examine the Current Approach

Our QA/QI team met and reviewed the Plan-Do-Study-Act (PDSA) process and brainstormed about the information needed for our

Community Health Profile. Our agency and our partners were all obtaining information from many resources/sites/avenues and it was a very time intense process. Some of our information was not current either. Many statistics had to be obtained by calling directly to the each program coordinator at the state for current information. It was identified that basic community health information is not readily available or current. Our AIM statement was developed: By June 30, 2009, develop a list of community indicators for Wright County to be used by our agency and other partners.

4. Identify Potential Solutions

The QA/QI core team identified 3 potential solutions to address:

- Contact partners to get input from them regarding their needs for Community Health Profile information.
- Develop a questionnaire to be filled out by our partners and our agency with their needs/indicators for this profile.
- Brainstorm with our agency and partners to develop indicator list for Community Health Profile to be used throughout our county.

5. Develop an Improvement Theory

After much discussion/brainstorming, the QA/QI Core Team developed the final AIM statement: By June 30, 2009, WCHD QA/QI Core Team (along with our community partners) will develop the community health indicators most important for our county.

DO

Test the Theory for Improvement

6. Test the Theory

WCHD QA/QI Core Team met to complete the PDSA cycle. Our agency met with partners face-to-face, by email, by mail, or by phone to discuss the Community Health Profile and obtain the needed information for our completed indicator list. We were striving for 90% compliance from the contacted partners to respond with their indicator needs for a Community Profile.

CHECK

Use Data to Study Results of the Test

7. Check the Results

Many of the partners contacted were appreciative of efforts to try to get more current Community Health Profile information and have it all in a central place. We were not able to meet our goal of 90% response from partners but did have good results from those involved. We were able to combine our list of indicators per partner requests. We found improvements were needed in our plan:

- Need to allow more time for our partners to respond and be involved in this process as schools and some other partners do not work in the Summer and April/May were busy months for them.
- Joint meetings with all partners instead of individual meetings.

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ACT

Standardize the Improvement and
Establish Future Plans

8. Standardize the Improvement or Develop New Theory

The WCHD QA/QI team felt that the PDSA process was extremely valuable and will be used with future projects.

The Community Health Profile developed will be shared with all of our own staff and with the involved partners in our county.

9. Establish Future Plans

The WCHD plans to use the PDSA cycle for other programs especially with Hospice, Homecare, and our Families programs. The agency is preparing for accreditation in our HOPES/Families program and will use this process for quality improvement as a result of this project. WCHD QA/QI team also feels the storyboard is a great way to present information to our Board of Health and others in a concise manner.